

## **ONE NIGHT PUBLIC DANCE PERMIT APPLICATION**

If the location has a Police Commission Dance Hall permit, a One Night Public Dance permit is not needed. The dance can occur under the umbrella of the existing Dance Hall permit. Applicants shall give at least **30-90 calendar days** to process their **One Night Public Dance** permit application.

### **Applicant:**

- (1) Proceed to the **Department of Building and Safety (LADBS)**, 201 N. Figueroa St. ,4<sup>th</sup> Floor, (213) 482-6899. Obtain an "Application for Temporary Special Event." Submit the application with the corresponding receipt. Make sure that on #6. Description of work you indicate: Dancing and entertainment Event or the type of event you are having and include **DANCING**. Upon approval, this changes the land use and allows zoning for the one night public dance. In addition here is the link for Building and Safety Department for your **Temporary Special Event (T.S.E.)** permit:  
<http://ladbs.org/LADBSWeb/TSE.jsf>
- (2) Obtain a plot plan of the location. Applicants can create their own plot plan. Indicate the set up description of the place you are using to host your event showing exits and streets surrounding the building or place and indicate the amount of people you expect and the dates of the event on your plot plan. Take this form to Los Angeles Fire Department.
- (3) Proceed to the Fire Department, Public Assemblage Unit, 200 N. Main St. Room 1710. Obtain a "Fire Department Conditions for Change of Use Events" application. If the Fire Inspector approves the application (Plot Plan) he/she will give you a signed approved stamp with a signature and date from the Los Angeles Fire Department.
- (4) Call Commission Investigation Division to set up an **appointment to submit** your documents and application for One Night Dance at (213) 996-1210. Other documents required for a One Night Dance are:
  - Applicant/s must submit a copy of their Driver's License and address has to match with what D.M.V has, note; should be the same on the application.
  - If applicant is an Organization you must submit Corporate Documents and all Corporate Officers must apply and submit a Live-scan form (finger prints).
  - **Live Scan Form** do this last since it is **only good for 10 business days after you get your finger prints done.**
  - Lease Agreement signed between both parties Lessor/Lessee with the address of the location, phone number of Lessor and a description of the type of event.
  - If applying as a Charity Event please make sure you are registered with our **Charitable Section. 213-996-1260.**
  - If Alcohol will be served at your event, we need to see a current ABC license with conditions if any and licensor needs to apply for form #218 with ABC.
  - Submit a **One Night Public Dance Permit Application** complete and needs to be signed and witnessed in front of a Deputy City Clerk or Notary Public. Or it can be signed in person the day you submit your application. One Night Dance application is \$381. Remember to **submit your application 30 days prior to your event.**

## LOS ANGELES POLICE DEPARTMENT

213) 996-1210

02.41.00 (08/09)

## ONE NIGHT PUBLIC DANCE PERMIT APPLICATION

FILE NO.

## INSTRUCTIONS:

To apply for a permit for an adult charity or adult commercial dance, file a single copy of this application at the Los Angeles City Clerk's Office, Room 101 City Hall, 201 No. Main Street, Los Angeles, California 90012.

This application shall be accompanied by check or money order, for prescribed fee, made payable to June Lagmay, City Clerk. Applicant's signature on the original copy must be witnessed by Deputy City Clerk or Notary.

Every question MUST be answered - incomplete applications will not be processed. Please typewrite or print with ink.

<input type="checkbox"/> ADULT CHARITY		<input type="checkbox"/> ADULT COMMERCIAL	
NAME OF SPONSORING ORGANIZATION		ADDRESS (No., St., City, State, Zip)	
APPLICANT'S NAME		RESIDENCE ADDRESS (No., St., City, State, Zip)	
PLACE OF BIRTH		DATE OF BIRTH	DRIVER'S LICENSE #
SEX	AGE	HEIGHT	WEIGHT
NAME OF HALL		ADDRESS (No., St., City, State, Zip)	
DATE AND TIME DANCE STARTS		DATE AND TIME DANCE ENDS	ESTIMATED ATTENDANCE
NUMBER OF SPECIAL OFFICERS EMPLOYED		HAS THIS ORGANIZATION HELD PRIOR DANCE IN L.A.? <input type="checkbox"/> YES <input type="checkbox"/> NO	ANY ARRESTS? <input type="checkbox"/> YES <input type="checkbox"/> NO
			STATE
		COLOR HAIR	COLOR EYES
		PHONE	
		RESIDENCE PHONE	
		BUSINESS PHONE	
		CAPACITY OF HALL	
		DATE OF LAST DANCE	

OFFICERS OF SPONSORING ORGANIZATION	OFFICE HELD	RESIDENCE ADDRESS	RESIDENCE PHONE
			BUSINESS PHONE

I certify (or declare) under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

APPLICANT'S SIGNATURE (Must be witnessed by Deputy City Clerk or Notary)	NOTARY'S SIGNATURE	DATE AND TIME WITNESSED
--	--------------------	-------------------------

DO NOT WRITE BELOW THIS LINE

IF ADDITIONAL SPACE IS REQUIRED, USE A BLANK SHEET OF PAPER, 8.5" X 11".

INVESTIGATOR'S COMMENTS:

COMMANDING OFFICER'S RECOMMENDATION		COMMANDING OFFICER'S SIGNATURE	DIVISION
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED			
COMMISSION INVESTIGATOR'S SIGNATURE		FIRE DEPARTMENT APPROVAL (Name & Date)	CITY CLERK'S PERMIT NO.

State of California

Department of Alcoholic Beverage Control

**CATERING OR EVENT AUTHORIZATION APPLICATION***Please read instructions before completing form.*

LICENSE NUMBER
<b>DRAFT</b>
RECEIVED
TOTAL FEE (\$10.00 per day)
\$

**SECTION 1**

1. LICENSEE NAME(S) (If an individual, first name, middle name, last name.)	2. CONTACT PERSON	3. CONTACT PHONE NUMBER
4. LICENSED PREMISES ADDRESS	5. MAILING ADDRESS (IF DIFFERENT)	
6. EVENT LOCATION (Street number and name, city, zip code)		
7. DESCRIPTION OF LOCATION (Parking lot, office building, residence, county/city park, etc.)		

8. EVENT LOCATION IS WITHIN THE CITY LIMITS <input type="checkbox"/> Yes <input type="checkbox"/> No	9. EVENT DATE(S)	10. TOTAL NUMBER OF DAY(S)
11. EVENT HOURS From _____ To _____	12. EVENT OPEN TO THE PUBLIC <input type="checkbox"/> Yes <input type="checkbox"/> No	13. ESTIMATED ATTENDANCE

**SECTION 2****CATERING EVENT**

14. EVENT TYPE <input type="checkbox"/> Convention <input type="checkbox"/> Trade Exhibit <input type="checkbox"/> Social Gathering <input type="checkbox"/> Anniversary <input type="checkbox"/> Sporting Event <input type="checkbox"/> Picnic <input type="checkbox"/> Wedding <input type="checkbox"/> Birthday <input type="checkbox"/> Other _____ <input type="checkbox"/> Event Authorized Pursuant to Business and Professions Code Section 25600.5	15. NUMBER OF EVENTS CATERED THIS YEAR AT THIS LOCATION (Not applicable to club licensees)
16. ORGANIZATION SPONSORING EVENT	17. PERSON IN CHARGE OF EVENT
18. MAILING ADDRESS	19. PHONE NUMBER OF ABOVE PERSON

**SECTION 3****EVENT ON ADJACENT PROPERTY**

20. NUMBER OF EVENTS ALREADY HELD THIS CALENDAR YEAR AT THIS LOCATION (Limit of 4 events per calendar year)		
21. LOCAL LAW ENFORCEMENT AGENCY APPROVAL SIGNATURE	23. TITLE	24. DATE SIGNED

**SECTION 4**

I declare under penalty of perjury that to the best of my knowledge these statements are true and correct.

LICENSEE SIGNATURE	DATE SIGNED
--------------------	-------------

**SECTION 5****AUTHORIZATION (For ABC Use Only)**

PROPERTY OWNER APPROVAL REQUIRED <input type="checkbox"/> Yes, attached <input type="checkbox"/> No	CONDITIONS/ACKNOWLEDGMENTS REQUIRED <input type="checkbox"/> Yes, attached <input type="checkbox"/> No	DIAGRAM REQUIRED <input type="checkbox"/> Yes, attached <input type="checkbox"/> No	LAW ENFORCEMENT APPROVAL REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No
DISTRICT APPROVAL BY (Name)	ABC EMPLOYEE SIGNATURE	DATE SIGNED	

\*\*\*This form NOT for SECONDHAND or PAWNBROKER State Licenses\*\*\*

NOT for Medical Marijuana or "Non Sworn LEA"

## REQUEST FOR LIVE SCAN SERVICE

*Applicant Submission*

**\*\*\*FOLLOW INSTRUCTIONS BELOW\*\*\***

ORI: CA0194200

Type of Application:

LICENSE CERT OR PERMIT

Job Title or Type of License, Certification or Permit:

POLICE COMMISSION PERMIT

**DO NOT ENTER DIFFERENT DATA**

Agency Address Set Contributing Agency:

LAPD

A14923

Agency authorized to receive criminal history information

Mail Code (five digit code assigned by DOJ)

P.O. BOX 30158

Street No. Street or P.O. Box

Contact Name (Mandatory for all school submissions)

LOS ANGELES CA 90030

(213) 996-1210

City State Zip Code

Contact Telephone No.

**\*\*\*ENTER INFORMATION FOR 1 - 11b\*\*\***

Name of Applicant: 1

(please print)

Last

First

MI

Alias: 2

Last

First

3

Driver's License No. 3

Date of Birth: 4

Sex: ☐ Male ☐ Female

Misc. No. BIL-

N/A

Agency Billing Number

Height: 6

Weight: 7

Misc No:

Eye Color: 8

Hair Color: 9

Home Address: 11a

Street or P.O. Box

Place of Birth: 10

11b

City, State and Zip Code

SOC: \_\_\_\_\_

**\*\*\*MAKE TWO COPIES. GO TO LIVE SCAN CENTER.\*\*\***

Your Number: TRC#

Level of Service

☒ DOJ

☐ FBI

OCA No. (Agency Identifying No.)

If resubmission, list Original ATI No. \_\_\_\_\_

Employer: (Additional response for agencies specified by statute)

Employer Name

Street No.

Street or P.O. Box

Mail Code (five digit code assigned by DOJ)

City

State

Zip Code

Agency Telephone No. (optional)

**\*\*\*DO NOT USE THIS SECTION\*\*\***

Live Scan Transaction Completed By: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Operator

Transmitting Agency

ATI No.

Amount Collected/Billed

**GIVE COPIES OF FORM:**

ORIGINAL-Live Scan Operator:

SECOND COPY-SEND TO LAPD:

THIRD COPY-Keep

# LOS ANGELES POLICE COMMISSION PERMITS—CHECKLIST "A"



## MOTION PICTURE SHOW

LAMC 12.70; 103.109; No Board Rules

- ❖ If adult movies will be shown at the location, LAMC 12.70 Section 12.70 applies.

## CYBER CAFE

LAMC 12.70; 103.101.4; No Board Rules

- ❖ Provides 5 or more personal computers and/or provides access to the internet for compensation and/or public access.
- ❖ Includes network gaming establishments.
- ❖ Does not include businesses where personal computer access is clearly incidental to the permitted use, as determined by the Zoning Administrator.
- ❖ Synonymous with Personal Computer Arcades, PC Cafés, Internet Cafés, and Cyber Centers.

## TYPE OF BUSINESS ENTITY

LEGAL CLASSIFICATION	REQUIRED DOCUMENTATION <sup>1</sup>	WHO MUST APPLY <sup>2</sup>
Sole Proprietorship	Spousal Statement, if needed	Sole Proprietor Spouse, if involved in the business
Partnership (General and Limited)	<ul style="list-style-type: none"> <li>• Spousal Statement, if needed <i>and</i></li> <li>• Partnership Agreement</li> </ul> <i>or</i> <ul style="list-style-type: none"> <li>• Certificate of Limited Partnership* for limited partnerships</li> </ul>	All partners
Limited Liability Companies	<ul style="list-style-type: none"> <li>• Articles of Organization</li> <li>• Fictitious Name Statement*</li> <li>• Operating Agreement, identifying partners</li> </ul>	All owners
Corporation (C-corp., S-corp., and Professional corp.)	<ul style="list-style-type: none"> <li>• Corporate Resolution/Meeting Minutes identifying officers</li> <li>• Articles of Incorporation*</li> <li>• Corporate seal and number</li> <li>• Stock certificates</li> </ul>	The President All corporate officers  Note: The Corporate Secretary signs the Resolution
Organization, Association, or Non-profit	Organization/Association Resolution <i>or</i> Organization/Association Bylaws	All executive officers  Note: The Association Secretary signs the Resolution

1 Documentation must show percentage of ownership of the business for each owner

2 In addition to the persons identified above, any and all person(s) with greater than 5% financial interest in the business must apply, regardless of the legal classification of the business.

\* Must be certified by the Secretary of State

\*\* The Articles of Organization or Annual Statement (filed with the Secretary of State) must identify who runs the company

SEC. 103.40.2. SUBJECT MATTER OF LIMITATIONS AND/OR CONDITIONS TO A PERMIT.

**(Added by Ord. No. 140,008, Eff. 2/20/70.)**

The limitations and/or conditions authorized by Section 103.40.1 of the Los Angeles Municipal Code may cover any matter relating to the activities to be exercised under the permit, the conduct of the business or the condition of the premises, which will protect the public welfare including but not limited to the following:

- (a) Restrictions as to hours during which the permitted activity may occur.
- (b) The employment of designated persons including the number and the manner in which said persons are to be employed.
- (c) Necessary sanitary facilities.
- (d) Necessary parking facilities.
- (e) Minimum seating and/or audience capacity.
- (f) The manner and time within which the public is to pay in order to gain access to the permitted activity.
- (g) Where the Board has determined that the cost of City services incident to the staging of the permitted activity will be increased because of the permitted activity, the Board may require the permittee to make payment into the general fund of the City of Los Angeles of an amount equal to the increased cost for the City Services.
- (h) Where the Board determines there is a substantial danger of injury or damage to the public and/or property because of the permitted activity, the Board may require a policy of insurance naming the City of Los Angeles as an additional insured together with its agents, servants and employees as a co-insured and/or bond to cover the damage and/or injury which may occur. The amounts of the insurance and/or bond, if any, and type of coverage, are to be determined by the Board after it has determined the nature and extent of probable danger of injury or damage to the public.